UTILITY **PATENT APPLICATION** TRANSMITTAL

Attorney Docket No. 240945US0DIV

First Inventor or Application Identifier Yoshinao NAGASHIMA

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Themas W. Barnes, III

Name:

Title AUTONOMIC NERVE REGULATING AGENT

Assignee Name:

Assignee Address:

14-10, Nihonbashi Kayabacho 1-chome, Chuo-ku, Tokyo 103-8219

Registration No.:

52,595

	See	APPLICATION ELEMENTS MPEP chapter 600 concerning utility patent application contents	Commissioner for Patents ADDRESS TO: Mail Stop Patent Application Alexandria, Virginia 22313								
1.		Fee Transmittal Form (e.g. PTO/SB/17) (Submit an original and a duplicate for fee processing)	ACCOMPANYING APPLICATION PARTS								
			7. 🗌 Assignm	ent Papers	(cover sh	eet & document(s))					
2.		Specification Total Sheets 30	8. E Applicati	ion Data Sh	neet. See	37 CFR 1.76					
			9. D 37 C.F.F	R. §3.73(b) e is an assign	Statement	Power of Attorney					
3.		Drawing(s) (35 U.S.C. 113) Total Sheets 18	10. 🗆 English	Translation	Documen	t (if applicable)					
1				ion Disclos nt (IDS)/PT		☐ Copies of IDS Citations					
√4.		Oath or Declaration Total Pages 3	12. 📕 Prelimin	ary Amend	ment						
•	a.	☐ Newly executed (original or copy)	13. 📕 White Ad	dvance Ser	ial No. Po	stcard					
	b.	Copy from a prior application (37 C.F.R. §1.63(d)) (for continuation/divisional with box 17 completed)	14. Certified Copy of Priority Document(s) (if foreign priority is claimed)								
		 i. DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 C.F.R. §1.63(d)(2) and 1.33(b). 	15. Applicant claims small entity status. See 37 CFR 1.27								
5.		CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)	16. Other:	Reque	st for Prior	ity					
6		Nucleotide and/or Amino Acid Sequence Submission		Interna	ational Sear	ch Report					
6.		(if applicable, all necessary) □ Computer Readable Form (CRF)									
	a. b.	Specification or Sequence Listing on :	}								
	D.	i. CD-ROM or CD-R (2 copies); or	į.								
		ii. Paper	ţ								
	c.	☐ Statements verifying identity of above copies	i I								
17.	lf a		v the requisite informat	tion below:							
	 If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below: □ Continuation □ Continuation □ Continuation in-part (CIP) of prior application no.: 09/972,887 pending, filed October 10, 2001 										
ŀ	Prior	application information: Examiner: Russell S. Travers		G	Froup Art U	Jnit: 1617					
For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.											
18.	\me	nd the specification by inserting before the first line the se	ntence:								
	This	application is a Continuation Division	☐ Continuation-								
	of application Serial No. 09/972,887 Filed on October 10, 2001 pending, which is a Continuation of International PCT Application No. PCT/JP01/00928 filed February 9, 2001.										
	This	application claims priority of provisional application Seria	-	01, 00,20	File	•					
19. CORRESPONDENCE ADDRESS											
22850											
(703) 413-3000 FACSIMILE: (703) 413-2220											
	Na	me: Norman F. Olylon		Registra	tion No.:	24,618					
Si	gnat	rure:			Date:	8-88-83					

Docket No.

240945US0DIV

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

INVENTOR(S) Yoshinao NAGASHIMA, et al.

SERIAL NO:

New Application

FILING DATE: Herewith

FOR:

AUTONOMIC NERVE REGULATING AGENT

FEE TRANSMITTAL

COMMISSIONER FOR PATENTS ALEXANDRIA, VIRGINIA 22313

FOR	NUMBER FILED					NUMBER EXTRA	RATE			CALCULATIONS
TOTAL CLAIMS	5		-	20	=	0	х	\$18	=	\$0.00
INDEPENDENT CLAIMS	4		-	3	=	1	х	\$84	=	\$84.00
☐ MULTIPLE DEPENDEN	MULTIPLE DEPENDENT CLAIMS (If applicable) + \$280 =									\$0.00
☐ LATE FILING OF DECLARATION								\$130	=	\$0.00
BASIC FEE									\$750.00	
TOTAL OF ABOVE CALCULATIONS										\$834.00
☐ REDUCTION BY 50% FOR FILING BY SMALL ENTITY										\$0.00
☐ FILING IN NON-ENGLISH LANGUAGE								\$130	=	\$0.00
☐ RECORDATION OF ASSIGNMENT									=	\$0.00
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Tel. (703) 413-3000 Fax. (703) 413-2220 (OSMMN 05/03)

Respectfully Submitted,

OBLON, SPIVAK, McCLELL

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Thomas W. Barnes III, Ph.D. Registration No. 52,595